

**BEFORE THE
DEPARTMENT OF TRANSPORTATION
OFFICE OF THE SECRETARY
WASHINGTON, DC**

In the Matter of the Application of)
)
)
FOX AIRCRAFT, LLC)
For a Certificate of Public Convenience)
And Necessity to Engage in Interstate)
Transportation of Passengers and Cargo)

DOCKET DOT-OST 2020-0262

**FILING OF REQUIRED DATA AND
PETITION TO WAIVE 6-DAY WAITING PERIOD**

Communications with Respect to This Document Should Be Addressed to:

Hank Myers
MTC
PO Box 7142
Bellevue, WA 98052-1142
425-830-4265
hank@mtcworld.com

Steve Fox
Fox Aircraft, LLC
6049 East Hart Lake Loop
Wasilla, AK 99654-9361
907-301-2770
stevefox180@yahoo.com

February 16, 2022

**BEFORE THE
DEPARTMENT OF TRANSPORTATION
OFFICE OF THE SECRETARY
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FOX AIRCRAFT, LLC)	DOCKET DOT-OST 2020-0262
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Fox Aircraft, LLC hereby provides the information required by Order 2020-6-1 as listed in Part (1).

A true copy of the Fox Aircraft, LLC FAA Air Carrier Operating Certificate is appended as Appendix A.

A true copy of the FAA Operations Specifications, Page A0001, is appended as Appendix B.

A certificate of insurance (OST Form 6410) for required liability insurance is appended as Appendix C.

Fox Aircraft has not had any changes in ownership, key personnel, operating plans, financial plans, or compliance history since the Final Order was issued.

Fox Aircraft, LLC has paid all pre-operating expenses, and is prepared to begin scheduled operations as soon as authorized.

An independent third-party verification of funds is appended as Appendix D.

Fox Aircraft, LLC has obtained an IATA two-character code (6F), and has filed a schedule with the Official Airline Guide, which it intends to operate as soon as the Department allows.

WHEREFORE: Fox Aircraft, LLC requests the Department allow it to begin scheduled air service as soon as possible.

Respectfully submitted

Fox Aircraft, LLC by Hank Myers, its Authorized Agent

A handwritten signature in blue ink, appearing to read "Hank Myers", with a stylized, cursive script.

CERTIFICATION

The contents of this application and the attached exhibits are true and correct to the best of my knowledge and belief. Pursuant to title 18, United States Code section 1001, I, in my individual

capacity and as the authorized representative of the applicant, have not in any manner knowingly and willfully falsified, concealed, or failed to disclose any material fact or made any false, fictitious, or fraudulent statement or knowingly used any documents which contain such statements in connection with the preparation, filing or prosecution of the application. I understand that an individual who is found to have violated the provisions of 18 U.S.C. section 1001 shall be fined not more than \$10,000 or imprisoned not more than five years, or both.

A handwritten signature in blue ink, appearing to read "Franklyn", with a stylized, flowing script.

February 16, 2022

Fox FAA Air Carrier Operating Certificate



Air Carrier Certificate

This certifies that

**FOX AIRCRAFT LLC
6049 HART LAKE LOOP
WASILLA, ALASKA 99654**

has met the requirements of the Federal Aviation Act of 1958, as amended, and the rules, regulations, and standards prescribed thereunder for the issuance of this certificate and is hereby authorized to operate as an air carrier and conduct common carriage operations in accordance with said Act and the rules, regulations, and standards prescribed thereunder and the terms, conditions, and limitations contained in the approved operations specifications.


This certificate is not transferable and, unless sooner surrendered, suspended, or revoked, shall continue in effect indefinitely.

By Direction of the Administrator

Certificate number: 9EXA132N

Effective Date: 3/12/2012

Issued at: AL03


John W. Sims
(Signature)
ACTING MGR, ANCHORAGE FSDO-03
(Title)
ALASKAN REGION, AL03
(Region/Office)

Operations Specification Page A0001

U.S. Department
of Transportation
Federal Aviation
Administration

Operations Specifications

A001 . Issuance and Applicability**HQ Control: 05/09/2003****HQ Revision: 02c**

- a. These operations specifications are issued to FOX AIRCRAFT LLC, whose principal base of operation is located at:

Primary Business Address:
6049 E. Hart Lake Loop
Wasilla, Alaska 99654

Mailing Address:
12630 Summer Dr
Anchorage, Alaska 99516

The holder of these operations specifications is the holder of Air Carrier Certificate Number 9FXA132N and shall hereafter be referred to as the certificate holder. The certificate holder is authorized to conduct:

On operations Common carriage pursuant to Title 14 Code of Federal Regulations (CFR) Section	119.21(a)(5) and provided, at all times, the certificate holder has appropriate written economic authority issued by the Department of Transportation.
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The certificate holder shall conduct these kinds of operations in accordance with the specific authorizations, limitations, and procedures in these operations specifications and all appropriate Parts of the CFR.

- b. These operations specifications are effective as of the "Date Approval is effective" listed in each paragraph and shall remain in effect as long as the certificate holder continues to meet the requirements of Part 119 as specified for certification.

- c. The certificate holder is authorized to conduct the operations described in subparagraph a under the following other business names:

Fox Air

- d. The certificate holder is authorized to conduct flights under 14 CFR Part 91 for crewmember training, maintenance tests, ferrying, re-positioning, and the carriage of company officials using the applicable authorizations in these operations specifications, without obtaining a Letter of Authorization, provided the flights are not conducted for compensation or hire and no charge of any kind is made for the conduct of the flights.

U.S. Department
of Transportation
Federal Aviation
Administration

Operations Specifications

1. Issued by the Federal Aviation Administration.
2. These Operations Specifications are approved by direction of the Administrator.



Digitally signed by Gregory A. Varner, Principal Maintenance Inspector (AL03)
[1] SUPPORT INFO: Correction to Primary Business address
[2] EFFECTIVE DATE: 1/26/2022, [3] AMENDMENT #: 3
DATE: 2022.01.26 17:04:44 -06:00

3. I hereby accept and receive the Operations Specifications in this paragraph.

Digitally signed by Jonna Bartlett, Office Manager
DATE: 2022.01.26 14:03:38 -06:00

CERTIFICATE OF INSURANCE

State of Alaska Verification Of Air Carriers Insurance

Division of Statewide Aviation
Department of Transportation & Public Facilities, State of Alaska
POB 196900, Anchorage, AK 99519-6900
Phone: (907) 269-0730 Fax: 269-0489

This is to certify that the following underwriters:

Name and Address of Insurers

StarStone National Insurance Company
Name: through London Aviation Underwriters Telephone: (206) 285-5401
Address: 33405 6th Ave. S, Federal Way, WA 98003-6335

Through the following:

Insurance Agency

Name: Falcon Insurance Agency of Alaska, Inc. Telephone: (907) 262-5548
Address: P.O. Box 3009, Soldotna, Alaska 99689

Policy Holder

Have issued insurance covering ☒ individual aircraft or ☐ all aircraft owned or operated by:

Contact Name: Stephen A. Fox Date: 11/11/2021
Policy Holder: Fox Aircraft, LLC
DBA: Fox Aircraft, LLC Telephone: 907-745-5857
Address: 6049 Hart Lake Loop, Wasilla, AK 99654-9361

Aircraft Description	FAA Tail Number	Insured Seats	Policy Change (*)	Effective Date
1984 PA-32R-301	N4375B	05		
1969 Cessna 207	N104K	06		
1980 Piper PA-31-350	N46FA	09		
1980 Cessna 207A	N800DF	06		
1983 Cessna 207A	N746KP	06	A	09/15/21
1980 Cessna T207A	N1301L	09	A	11/11/21

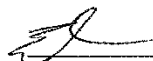
*Please indicate aircraft (A) addition, (D) deletion, (G) ground coverage only or (S) change in seats insured.

A policy of policies of bodily injury and property damage insurance which, through the terms of the policy or endorsement comply with the required minimum amounts and terms set forth in AS 02.40.010(a)(1) \$150,000 per seat for bodily injury or death in a single occurrence, and (2) \$100,000 for property damage in a single occurrence.

This certificate and the insurance evidenced hereby may be canceled by giving not less than thirty (30) days notice in writing to the State of Alaska, Department of Transportation and Public Facilities, Division of Statewide Aviation, measured from the date received by the Department. AS Section 02.40.020(a)

Policy Number: SAV100411202 Effective from: 06/08/2021 to 06/08/2022

Ed French
Authorized Agent or Broker (Type or Print)


Signature



Office of the Secretary
of Transportation

AGENCY DISPLAY OF ESTIMATED BURDEN

The public reporting burden for this collection of information is estimated to average 15-30 minutes per response. If you wish to comment on the accuracy of the estimate or make suggestions for reducing this burden, please direct your comments to: U.S. Department of Transportation, Office of Aviation Analysis, X-56, 1200 New Jersey Ave. S.E., Washington, D.C. 20590. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

NOTE: For information on where to file completed copies of this form, see FILING INSTRUCTIONS below.

OMB No. 2108-0030 Expires April 30, 2023

U.S. AIR CARRIERS - CERTIFICATE OF INSURANCE POLICIES OF INSURANCE FOR AIRCRAFT ACCIDENT BODILY INJURY AND PROPERTY DAMAGE LIABILITY

FILING INSTRUCTIONS: File a signed original of this form with the Federal Aviation Administration, Air Transportation Division, electronically to: AFS-260-Insurance@faa.gov, or mail to: AFS-260, 800 Independence Ave., S.W., Washington, D.C., 20591 (See EXCEPTION)

EXCEPTION: For any insured that is located in the State of Alaska, file a signed original of this form with the Federal Aviation Administration, Air Transportation Division, electronically to: AFS-260-Insurance@faa.gov, or mail to: Anchorage Flight Standards Service Office, 849 E. 36th Avenue, Suite 600, Anchorage, Alaska 99503.

(Please type information, except signatures.)

THIS CERTIFIES THAT: StarStone National Insurance Company through London Aviation Underwriters

(Name of Insurer)

has issued a policy or policies of Aircraft Liability Insurance to Fox Aircraft, LLC

6049 Hart Lake Loop, Wasilla, AK 99654

FAA Certificate Number 9FXA132N

(Name, address and FAA Certificate number of Insured U.S. Air Carrier)

effective from June 8, 2021 until ten (10) days after written notice from the insurer or carrier of the intent to terminate coverage is received by the Department of Transportation.

NOTE: Part 205 of the Department's Regulations does not allow for a predetermined termination date, and a certificate showing such a date is unacceptable.

1. The Insurer (Check One):

- ☒ is licensed to issue aircraft insurance policies in the United States;
☐ is licensed or approved by the government of _____ to issue aircraft insurance policies; or
☐ is an approved surplus line insurer in the State(s) of _____

2. The insurer assumes, under the policy or policies listed below, aircraft accident liability insured to minimums at least equal to the following during operation, maintenance, or use of aircraft in "air transportation" as that term is defined in 49 U.S.C. 40102. (Complete applicable section(s) A, B, or C below):

A. U.S. AIR TAXI OPERATORS (EXCLUDING U.S. COMMUTER AIR CARRIERS) WITH PART 298 AUTHORITY ONLY:

The aircraft covered by this policy are SMALL AIRCRAFT (i.e., with 60 or fewer passenger seats or with a maximum payload capacity of 18,000 pounds or less). (Complete separate or combined coverage as appropriate):

☐ Separate Coverages:

Policy No.	Type of Liability	Minimum Limit	
		Each person	Each Occurrence
	Bodily Injury Liability (Excluding Passengers)	\$75,000	\$300,000
	Passenger Bodily Injury	\$75,000	\$75,000 x 75% of total number of passenger seats installed in aircraft
	Property Damage		\$100,000

☒ Combined Coverage: The amount of coverage set forth below is a single limit of liability for each occurrence at least equal to the required minimums stated above for bodily injury (excluding passengers), property damage, and passenger bodily injury.

Policy No. SAV100411202 Amount of Coverage \$ 1,000,000

☐ This policy covers CARGO operations only and excludes passenger liability insurance.

THIRD PARTY VERIFICATION OF FUNDS



Huffman Branch
MAC K3211-011
1351 E. Huffman Road
Anchorage, AK 99515

February 14, 2022

FOX AIRCRAFT LLC
6049 E HART LAKE LOOP
WASILLA AK 99654-9361

Dear to whom it concern:

This letter is to indicate that the Customer named above has the following deposit accounts with Wells Fargo Bank, N.A.

Account Number (Last 4-digits)	Date Opened	Current Balance *
9671	OPENED 06/05/2015	\$675,600.70

* The Current Balance provided above is the opening available balance as of the date of this letter but such balance does not include any uncollected items and/or amounts that have not yet been posted to such account as of the date hereof.

Important Disclosures

The recipient of this information hereby acknowledges that Wells Fargo ("we", "us") does not represent or warrant that the information provided herein is complete or accurate, and any errors or omissions in the information shall not be a basis for a claim against us. This information may not disclose the entire relationship the Customer maintains with us.

This information is subject to change at any time without notice. We are not obligated to notify the recipient of any change in this information, or if any deposit account relationship referenced herein is, or is in the process of being, modified, terminated, or cancelled, unless we are required to do so by law or under the terms of the applicable deposit account agreement.

This letter does not constitute a guaranty of future balances or credit support of any nature, nor do we accept any duty, responsibility, liability or obligation that may arise from providing this letter, including any reliance upon the information or for any loss or damage that may result.

If you have any questions about the information provided or need additional information, please contact the bank's customer as the bank has not been authorized to provide you with any additional information.

Thank you. We appreciate your business.

Wells Fargo Bank, N.A.

Oksana Nordgaarden	86888	03408
PH# 9073485373		MAC K3211-011
Wells Fargo Bank, N.A.		COID 00569
Huffman Branch	Office	AU 001551

